

CLAIMS ONLY							Application Number <b>10620172</b>		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	1						51				
2	1						52				
3	1						53				
4		3					54				
5		3					55				
6	1						56				
7		1					57				
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44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	4						Total Indep				
Total Depend	3						Total Depend				
Claims	17						Claims				

Best Available Copy